

**Fill in this information to identify your case:**

|   |                                  |             |           |
|---|----------------------------------|-------------|-----------|
| Debtor 1                                | <b>Tiffany S Newkirk</b>         |             |           |
|   | First Name                       | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         |                                  |             |           |
|   | First Name                       | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF PENNSYLVANIA |             |           |
| Case number<br>(if known)               | 18-16160-ELF                     |             |           |

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

**AMENDED**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.  
☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

|     |  | Total claim  | Priority amount | Nonpriority amount |
|-----|--|--|-----------------|--------------------|
| 2.1 | <b>Internal Revenue</b><br>Priority Creditor's Name<br><b>PO Box 7346</b><br><b>Philadelphia, PA 19101</b><br>Number Street City State Zip Code  | Last 4 digits of account number  | \$6,433.61      | \$0.00             |
|     | <b>Who incurred the debt?</b> Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br><b>Is the claim subject to offset?</b><br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <b>When was the debt incurred?</b><br><br><b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of PRIORITY unsecured claim:</b><br><input type="checkbox"/> Domestic support obligations<br><input checked="" type="checkbox"/> Taxes and certain other debts you owe the government<br><input type="checkbox"/> Claims for death or personal injury while you were intoxicated<br><input type="checkbox"/> Other. Specify _____ |                 | \$6,433.61         |
|     |  |  | <b>Taxes</b>    |                    |

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim**

Debtor 1 **Tiffany S Newkirk**

Case number (if known)

**18-16160-ELF**

|     |   |  |                   |
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| 4.1 | <b>Comcast Cable</b><br>Nonpriority Creditor's Name<br><b>P.O. Box 3001</b><br><b>Southeastern, PA 19398-3001</b><br>Number Street City State Zip Code<br><b>Who incurred the debt?</b> Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> <b>Check if this claim is for a community debt</b><br><b>Is the claim subject to offset?</b><br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <b>Last 4 digits of account number</b> <u><b>2872</b></u><br><b>When was the debt incurred?</b> _____<br><b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <u><b>Utility Bill</b></u> | <b>\$1,333.79</b> |
|-----|---|--|-------------------|

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|-----|--|--|-------------------|
| 4.2 | <b>Commonwealth of Pennsylvania</b><br>Nonpriority Creditor's Name<br><b>Department of Labor and Industry</b><br><b>UI Payment Services</b><br><b>P.O. Box 67503</b><br><b>Harrisburg, PA 17106-7503</b><br>Number Street City State Zip Code<br><b>Who incurred the debt?</b> Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> <b>Check if this claim is for a community debt</b><br><b>Is the claim subject to offset?</b><br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <b>Last 4 digits of account number</b> <u><b>0575</b></u><br><b>When was the debt incurred?</b> _____<br><b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <u><b>Unemployment Overpayment</b></u> | <b>\$4,300.00</b> |
|-----|--|--|-------------------|

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| 4.3 | <b>Peco Energy</b><br>Nonpriority Creditor's Name<br><b>2301 Market Street</b><br><b>Philadelphia, PA 19101</b><br>Number Street City State Zip Code<br><b>Who incurred the debt?</b> Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> <b>Check if this claim is for a community debt</b><br><b>Is the claim subject to offset?</b><br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <b>Last 4 digits of account number</b> <u><b>8013</b></u><br><b>When was the debt incurred?</b> _____<br><b>As of the date you file, the claim is:</b> Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <u><b>Utility Bill</b></u> | <b>\$2,511.14</b> |
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Debtor 1 **Tiffany S Newkirk**

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|     |   |   |                   |
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| 4.4 | <b>PGW</b><br>Nonpriority Creditor's Name<br><b>Credit and Collections Department</b><br><b>800 W. Montgomery Avenue, 3rd Floor</b><br><b>Philadelphia, PA 19122</b><br>Number Street City State Zip Code<br>Who incurred the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number <b>0449</b><br>When was the debt incurred?<br>As of the date you file, the claim is: Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>Utility Bill</b> | <b>\$6,203.32</b> |
|-----|---|---|-------------------|

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| 4.5 | <b>Verizon</b><br>Nonpriority Creditor's Name<br><b>PO Box 15124</b><br><b>Albany, NY 12212-5124</b><br>Number Street City State Zip Code<br>Who incurred the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number <b>0181</b><br>When was the debt incurred?<br>As of the date you file, the claim is: Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify | <b>\$1,616.88</b> |
|-----|---|---|-------------------|

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|-----|--|---|-------------------|
| 4.6 | <b>Water Revenue Bureau</b><br>Nonpriority Creditor's Name<br><b>1401 JFK Blvd.</b><br><b>Philadelphia, PA 19102-1663</b><br>Number Street City State Zip Code<br>Who incurred the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number <b>3001</b><br>When was the debt incurred?<br>As of the date you file, the claim is: Check all that apply<br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>Utility Bill</b> | <b>\$8,043.07</b> |
|-----|--|---|-------------------|

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**City of Philadelphia - Law Dept.**  
**One Parkway Bldg.**  
**1515 Arch Street, 14th Fl**  
**Philadelphia, PA 19107**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Tiffany S Newkirk**

Case number (if know)

**18-16160-ELF**

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                                |   | Total Claim |                     |
|--------------------------------|---|-------------|---------------------|
| Total<br>claims<br>from Part 1 | 6a. Domestic support obligations  | 6a.         | \$ <u>0.00</u>      |
|                                | 6b. Taxes and certain other debts you owe the government  | 6b.         | \$ <u>6,433.61</u>  |
|                                | 6c. Claims for death or personal injury while you were intoxicated  | 6c.         | \$ <u>0.00</u>      |
|                                | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.         | \$ <u>0.00</u>      |
|                                | 6e. Total Priority. Add lines 6a through 6d.  | 6e.         | \$ <u>6,433.61</u>  |
| Total<br>claims<br>from Part 2 | 6f. Student loans   | 6f.         | \$ <u>0.00</u>      |
|                                | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.         | \$ <u>0.00</u>      |
|                                | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.         | \$ <u>0.00</u>      |
|                                | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i.         | \$ <u>24,008.20</u> |
|                                | 6j. Total Nonpriority. Add lines 6f through 6i.   | 6j.         | \$ <u>24,008.20</u> |